REMARKS

Claims 33 and 68-100 remain pending in this application, all of which stand rejected. Based on the foregoing amendments and following remarks, reconsideration and allowance of this application is respectfully requested.

Claim Objections

Claims 56-88 stand objected to as being misnumbered. Accordingly, claims 56-88 have been renumbered as claims 68-100. As such, Applicant respectfully requests withdrawal of the objections of these claims.

Claim Rejections-35 U.S.C. §112

Claims 33, 68-79, 86, and 90-100 stand rejected under §112, second paragraph, as being indefinite for failing to provide antecedent basis for the terms "extremity" and "proximal direction." Although Applicant believes that these terms inherently find antecedent basis in the claims, claims 33, 74, 86, and 92 have been amended to explicitly provide antecedent basis for these limitations. In addition, claim 92 has been amended to refer to the "distal tip" as passing through the distal opening of the occlusive device. As such, Applicant respectfully requests withdrawal of the §112 rejections of claims 33, 68-79, 86, and 90-100.

Claim Rejections-35 U.S.C. §102

Ryan

Claims 33 and 68-100 stand rejected under 35 U.S.C. §102(e) as being anticipated by U.S. Patent No. 5,830,217 ("Ryan"). Without acquiescence that Ryan is, indeed, §102(e) prior art, and without prejudice to antedate the filing date of Ryan should it become necessary, Applicant

respectfully traverses this rejection, since Ryan does not disclose each and every element required by these claims, as amended.

In particular, independent claim 33 has been amended to require the distal tip member to distally extend beyond the distal extremity of the tubular body. In contrast, the distal extremity of every tubular body 3 illustrated and described in Ryan distally extends beyond any element that can be called a distal tip member. The Examiner's statement that "Ryan discloses only the guidewire to extend distally from the tip 12, 15, 16, and the catheter 13 only extends proximally, therefore the tip 12, 15, 16 does form the extremity of the tubular catheter body 3" is not understood. The distal end of the catheter body 3 extends distally from the tip 12, 15, 16, as clearly illustrated in Figs. 2-5.

In addition, Applicant disagrees with the Examiner's statement that "Ryan's method of production of the dissolvable tip is to dip the balloon catheter into a composition, therefore, in order to dip the catheter, an entire end, the distal tip, will inherently be coated with the dissolvable material." Ryan states that "the stent and balloon may be dipped in melted sucrose . . . ." (see col. 4, lines 55-56), not the entire distal end of the catheter. As such, it is not inherent that the distal extremity of the catheter tube be coated with the dissolvable material, since the stent and balloon can be laterally dipped in the dissolvable material, while rolling the stent and balloon to coat the entire circumference with the material. Based on the figures, which show no material on the distal extremity of the catheter tube, it can only be concluded that the distal extremity of the catheter tube was not dipped into the dissolvable material.

Independent claim 80 requires that the distal tip member not hinder deployment of the occlusive device before undergoing bioabsorption or dissolution. In contrast, in every embodiment illustrated in Ryan, the bioabsorbable fairings 12, 15, and 23 (Figs. 2, 3, and 5) and mass 16 (Fig. 4) are designed to hinder deployment of the stent until they dissolve.

Independent claim 92 requires that the distal tip member be distal to the occlusive device and be configured to remain fixedly secured to the distal portion of the tubular body during the entire bioabsorption or dissolution process. In contrast, the fairings 12, 15, 23 are not disclosed as being capable of remaining fixedly secured to the tubular body during the entire bioabsorpotion or dissolution process, and most likely cannot since they are formed of thin hollow shells. Claim 92 also requires that the distal tip member be capable of proximally passing through the distal opening of the deployed occlusion device when the tubular body is displaced in a proximal direction. In contrast, the fairings 12, 15, 23 cannot proximally pass through the distal opening of the deployed stent 1, since they are adhered to the outside of the stent 1. To the extent that the mass 16 illustrated in Fig. 4 can be considered to form some type of distal tip, it is not distal to the stent 1, as required by claim 92.

Thus, Applicant submits that independent claims 33, 80, and 92, as well as the claims depending therefrom (claims 68-79, 81-91, and 93-100), are not anticipated by Ryan, and as such, respectfully requests withdrawal of the §102 rejection of these claims based on this reference.

Roberts

Claims 33 and 68-100 stand rejected under 35 U.S.C. §102(b) as being anticipated by U.S. Patent No. 5,603,698 ("Roberts"). Applicant respectfully traverses this rejection, since Roberts does not disclose each and every element required by these claims, as amended.

In particular, independent claim 33 has been amended to require the distal tip member be fixedly secured to the distal portion of the tubular body. In contrast, to the extent that the tip 26 of Roberts is slidable relative to the tubular body 4, and thus, can form the extremity, it is not fixedly secured to the body 4.

Independent claims 80 and 92 require that the distal tip member be configured to remain fixedly secured to the distal portion of the tubular body during the entire bioabsorption or dissolution process. Thus, even though the distal tip 26 of the Roberts device may be capable of being disposed on the tubular body 4 during the bioabsorption process, it does not remain fixedly secured to the distal portion of the tubular body, but rather becomes slidable relative to the tubular body. Independent claim 92 further requires that the distal tip member be configured to proximally pass through the distal opening of the deployed occlusion device when the tubular body is displaced in a proximal direction. As illustrated in Figs. 2a-2h of Roberts, the distal tip 26 clearly is not capable of doing this.

Thus, Applicant submits that independent claims 33, 80, and 92, as well as the claims depending therefrom (claims 68-79, 81-91, and 93-100), are not anticipated by Roberts, and as such, respectfully requests withdrawal of the §102 rejection of these claims based on this reference.

Conclusion

Based on the foregoing, it is believed that, with entry of this amendment, all claims are now allowable and a Notice of Allowance is respectfully requested. If the Examiner has any questions or comments regarding this amendment, the Examiner is respectfully requested to contact the undersigned at (714) 830-0600.

Respectfully submitted,
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